

Title:

Pediatric spinal cord lipoma – operative experience

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Abstract:

Background

Spinal cord lipoma causes tethered cord syndrome. The tethering produces neurological, urological and orthopaedic problems which cause significant morbidity in both children and adult. Prophylactic surgery was shown to have a trend in minimizing tethered cord syndrome in both symptomatic and asymptomatic patient.^{1,2} Long term results are also promising.² We present our 10-year experience of surgical treatment of spinal cord lipoma.

Methods

This is a retrospective case series. Patients operated in Tuen Mun Hospital from 2004 to 2013 were included. Degree of symptom control, prognostic factors including cord-sac ratio, symptomatic pre-operation, re-do cases, age and lipoma type will be analysed. Progression free survival will be used as primary end point.

Results

36 patients were identified. 5 (13.9%) of them were adults. Median follow-up was 4.94 years. 8 (22.2%) were asymptomatic including normal urodynamic study. 4 (11.1%) got worse after surgery. Others were asymptomatic, improved and stable along the post-operative course. 3 (0.08%) experienced progression of disease after surgery who were all re-do cases. The most common surgical-related complication was pseudomeningocele (2; 0.06%).

Conclusions

Surgical treatment of spinal cord lipoma is an effective and safe option for both symptomatic and asymptomatic patients. Surgical treatment should be advised unless the patient or parents opt otherwise.

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2. Pang D, Zovickian J, Oviedo A. Long-term outcome of total and near-total resection of spinal cord lipomas and radical reconstruction of the neural placode, part II: outcome analysis and preoperative profiling. *Neurosurgery* 2010;66:253-72; discussion 72-3.